



APPLICATION FOR COASTAL SITE PLAN REVIEW

Complete, notarize, and forward twelve (12) copies of all project plans and documents to Clerk of the Zoning Board with a **\$275.00 Filing Fee** payable to the City of Stamford. **NOTE: ADVERTISING COST OF THE RESULTS OF THE ZONING BOARD REVIEW IS PAYABLE BY THE APPLICANT PRIOR TO PUBLICATION.**

APPLICANT NAME (S): \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

APPLICANT PHONE #: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

PROPERTY OWNER (S): \_\_\_\_\_

CONTACT FOR QUESTIONS: \_\_\_\_\_

ACREAGE OF PROJECT PARCEL: \_\_\_\_\_

SQUARE FEET OF PROPOSED BUILDING: \_\_\_\_\_

ZONING DISTRICT OF PROJECT PARCEL: \_\_\_\_\_

PROJECT DESCRIPTION:

Coastal resources on which the project is located  
or which will be affected by the project:  
(See "Index of Policies" Planning Report 30)

Coastal policies affected by the project:  
(See "Index of Policies" Planning Report 30)

- ☐ a. bluffs or escarpments

☐ b. rocky shorefront

☐ c. beaches and dunes

☐ d. intertidal flats

☐ e. tidal wetlands

☐ f. freshwater wetlands

☐ g. estuarine embayments

☐ h. coastal flood hazard areas

☐ i. coastal erosion hazard area

☐ j. developed shorefront

☐ k. islands

☐ l. coastal waters

☐ m. shorelands

☐ n. shellfish concentration areas

☐ o. general resource

☐ p. air resources

☐ a. water dependent uses

☐ b. ports and harbors

☐ c. coastal structures & filing

☐ d. dredging & navigation

☐ e. boating

☐ f. fisheries

☐ g. coastal recreation access

☐ h. sewer & water lines

☐ i. energy facilities

☐ j. fuel, chemicals & hazardous materials

☐ k. transportation

☐ l. solid waste

☐ m. dams, dikes & reservoirs

☐ n. shellfish concentration

☐ o. general development

☐ p. open space

If the project is adjacent to coastal waters, is the project water dependent? (See C.G.S. sec. 22a-93)

YESNO

NOT APPLICABLE

If yes, in what manner?

Docks, piers, etcGeneral public access

Industrial process or cooling waters?Other, please specify: \_\_\_\_\_

What possible adverse or beneficial impacts may occur as a result of the project? (Attach additional sheet if necessary)

How is the proposal consistent with all applicable goals and policies of the CAM Act?

What measures are being taken to mitigate adverse impacts and eliminate inconsistencies with the CAM Act? (Attach additional sheet if necessary)

Is there any deed restriction(s) that may prohibit the construction proposed in this application? \_\_\_\_\_

If yes, list Town Clerk Book & Page reference: \_\_\_\_\_

Is any injunction or other litigation pending concerning this property? \_\_\_\_\_

If yes, include citation: \_\_\_\_\_



DATED AT STAMFORD, CONNECTICUT, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_

SIGNED: \_\_\_\_\_

STATE OF CONNECTICUT  
COUNTY OF FAIRFIELD ss STAMFORD\_\_\_\_\_20\_\_\_\_\_

Personally appeared \_\_\_\_\_, signer of the foregoing application, who made oath to the truth of the contents thereof, before me.

\_\_\_\_\_  
Notary Public - Commissioner of the Superior Court

**FOR OFFICE USE ONLY**

APPL. #: \_\_\_\_\_ Received in the office of the Zoning Board: *Date:* \_\_\_\_\_

*By:* \_\_\_\_\_

*Revised 03/1/17*